

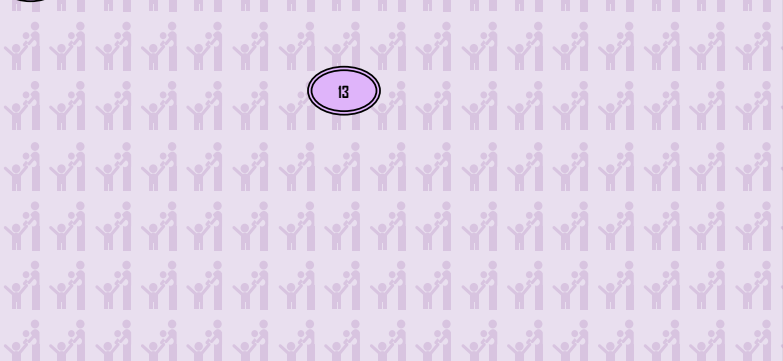
Section 3

THE FOOD INSTRUMENT

Food Prescription

The WIC food instrument is the key to the Arizona WIC Program Food Delivery System. The food instrument is a food prescription for the participant. The Arizona WIC Program uses grocers, military commissaries, pharmacies and the regular banking system in the community to provide food to the WIC participant. This system allows participants/authorized representatives to redeem food instruments for specific foods available from authorized retail stores, military commissaries and pharmacies. The Vendor will receive payment for the food items purchased when food instruments are properly negotiated and deposited in the Vendor's sole authorized bank account as stated in the Vendor Contract.

What is on the Food Instrument?

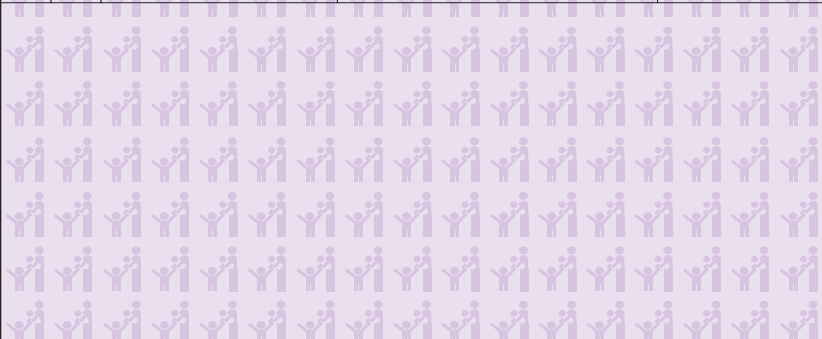
1	A DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon.-Fri. 8 AM - 5 PM, Call 1-800-2525-WIC		2	IF DRAFTS SUBJECT TO STATE OR PROSECUTION. VOID IF ALTERED	DRAFT #	3	4		
5	AGENCY CLINIC	PARTICIPANT ID	6	PARTICIPANT	7	DRAFT TYPE	8		
 <div style="position: absolute; top: 10%; left: 40%; border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; text-align: center; line-height: 40px;">13</div>									
						AZ WIC USE ONLY	9	FIRST DATE TO USE	10
						DATE OF USE	11		
						LAST DATE TO USE	12		
						ACTUAL \$ AMOUNT			
						\$ CORRECTION ONLY	15	CASHIER INITIAL	16
						\$	14		
						PAY TO THE ORDER OF:			
						17			
						PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE			
						SIGNATURE AT STORE			
						18			
						CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.			

1. Information box – Address and phone number for the State agency.
2. Required statement.
3. Draft #: Food instrument serial number.
4. Information box for banking contractor.
5. Identifies the local WIC agency and clinic that issued the food instrument.
6. Participant's identification number.
7. Participant's name.
8. Draft Type: Code to describe the food items listed on the food instrument.
9. Arizona WIC Use Only – To be used as needed by the State agency.
10. First Date to Use: The food instrument is not valid before the first date to use. Due to clinic schedules, WIC participants/authorized representatives may receive food instruments **before** the first date to use. However, do not cash the food instrument **before** the first date to use.
11. Date of Use: **Cashier** will write **today's** date in this box.
12. Last Date to Use: The last day (until midnight) that the food instrument may be accepted.
13. The prescribed food items and quantities to be purchased.
14. The dollar amount of the food instrument must equal only the items listed **and** purchased.
15. \$ Correction Only: To be filled in by the **Cashier** when a mistake is made in the \$ box and a new total is needed. Must be completed at the time of the transaction **and** in the presence of the WIC participant/authorized representative.
16. Cashier Initial: **Cashier**, upon completion of the "\$ correction only" box, will place **his or her** initials in this box to verify the change.
17. The Vendor will apply their unique Arizona WIC Program Vendor ID stamp.
18. Signature at Store: The signature of the participant or authorized representative. The signature at the store does not need to be a carbon copy of the signature on the ID Folder (or Proxy Certification Form). It must be the same first and last names (in that order) and have the same characteristics as the signature on the ID Folder (or Proxy Certification Form). The signature at the store **must** occur at the store in front of the cashier at the end of the transaction. **NOTE:** If the participant is an infant or child, the authorized representative will usually be the parent or guardian of the participant; however, the last names may or may not be the same.

One Signature Food Instrument

The Arizona WIC Program uses only one type of WIC food instrument: Arizona In Motion (AIM) clinic computer generated. The AIM food instrument does not include a clinic signature. The WIC participant/authorized representative will sign the food instrument at the store in the presence of the cashier **after** the food items have been rung up and the dollar amount has been recorded on the food instrument. (See Cashing Food Instruments in this Manual.) An example of the AIM clinic computer generated WIC food instrument is shown below.

AIM Clinic Computer-Generated Food Instrument

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELP? Mon.-Fri. 8 AM - 5 PM, Call 1-800-2525-WIC				MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT #	
AGENCY	CLINIC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE			
						AZ WIC USE ONLY	
						FIRST DATE TO USE	
						DATE OF USE	
						LAST DATE TO USE	
						PAY TO THE ORDER OF:	
ACTUAL \$ AMOUNT							
\$ CORRECTION ONLY						CASHIER INITIAL	
\$							
TAX EXEMPT SALE NOT TO EXCEED \$200.00						NOT PAYABLE WITHOUT VENDOR ID STAMP	
PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE							
SIGNATURE AT STORE							
						CASHIER: DO NOT ACCEPT IF ALREADY SIGNED, MUST MATCH SIGNATURE ON ID FOLDER.	

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